CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS

NEW COURSE PROPOSAL

DATE: NOVEMBER 21, 2005 REV 9.26.07
PROGRAM AREA PERFORMING ARTS

1. Catalog Description of the Course. [Follow accepted catalog format.]

Prefix PATH Course# 481 Title Production Units (3)
6 hours Activity per week
☒ Prerequisites PA 360 and consent of instructor
☐ Corequisites
Description Directing, acting or implementing technical projects in CSUCI musical theatre productions.

Graded ☒ CR/NC ☒ Repeatable for up to 6 units
Gen Ed ☐ Lab Fee Required ☐ A - F
Categories ☑ Optional (Student’s choice) Total Completions Allowed
Lab Fee Required ☑ Multiple Enrollment in same semester choice

2. Mode of Instruction.

<table>
<thead>
<tr>
<th>Lecture</th>
<th>Seminars</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Units</td>
<td>Hours per Unit</td>
<td>Benchmark Enrollment</td>
</tr>
<tr>
<td>☐</td>
<td></td>
<td>15</td>
</tr>
</tbody>
</table>

3. Justification and Learning Objectives for the Course. (Indicate whether required or elective, and whether it meets University Writing, and/or Language requirements) [Use as much space as necessary]

Justification: This class is required for the emphasis in Theatre. One of the essential goals of the Performing Arts program is to provide students with opportunities to gain expertise and practical experience in theatre. This course requires students to propose projects that will involve them in multiple aspects of theatre production. This class is the primary locus for students to gain interdisciplinary experience in the performing arts.

Learning Objectives:
Upon completion of this course students will be able to:
(Press enter for the next bulleted item)

• Propose directing, acting or technical theatre projects
• Gain necessary approvals for projects
• Complete projects with faculty supervision
• Write reflective evaluations of the learning experience

4. Is this a General Education Course YES ☐ NO ☒

If Yes, indicate GE category and attach GE Criteria Form:

A (English Language, Communication, Critical Thinking)
A-1 Oral Communication ☐
A-2 English Writing ☐
A-3 Critical Thinking ☐

B (Mathematics, Sciences & Technology)
B-1 Physical Sciences ☐
B-2 Life Sciences – Biology ☐
B-3 Mathematics – Mathematics and Applications ☐
B-4 Computers and Information Technology ☐

C (Fine Arts, Literature, Languages & Cultures)
C-1 Art ☐

6/6/05 cp
5. **Course Content in Outline Form.** [Be as brief as possible, but use as much space as necessary]

(Press enter for the next bulleted item)

- Propose directing, acting or technical theatre projects
- Gain necessary approvals for projects
- Complete projects with faculty supervision
- Write reflective evaluations of the learning experience

Does this course overlap a course offered in your academic program? YES ☐ NO ☒

If YES, what course(s) and provide a justification of the overlap?

Does this course overlap a course offered in another academic area? YES ☐ NO ☒

If YES, what course(s) and provide a justification of the overlap?

Signature of Academic Chair of the other academic area is required on the consultation sheet below.

6. **Cross-listed Courses (Please fill out separate form for each PREFIX)**

List Cross-listed Courses

Signature of Academic Chair(s) of the other academic area(s) is required on the consultation sheet below

Department responsible for staffing: Performing Arts

7. **References.** [Provide 3 - 5 references on which this course is based and/or support it.]

(Press enter for the next number)


8. **List Faculty Qualified to Teach This Course.**

Performing Arts Faculty

9. **Frequency.**

a. Projected semesters to be offered: Fall ☒ Spring ☐ Summer ☐

10. **New Resources Required.** YES ☒ NO ☐

If YES, list the resources needed and obtain signatures from the appropriate programs/units on the consultation sheet below.

a. Computer (data processing), audio visual, broadcasting needs, other equipment.

b. Library needs
c. Facility/space needs
Rehearsal and performance spaces for musical theatre productions.

11. Will this new course alter any degree, credential, certificate, or minor in your program? YES ☐ NO ☒
If, YES attach a program modification form for all programs affected.

Bob Mayberry ____________________________ 10 October 2005
Proposer of Course  Date
## Approvals

<table>
<thead>
<tr>
<th>Role</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Chair</td>
<td></td>
</tr>
<tr>
<td>General Education Committee Chair</td>
<td></td>
</tr>
<tr>
<td>Curriculum Committee Chair</td>
<td></td>
</tr>
<tr>
<td>Dean</td>
<td></td>
</tr>
</tbody>
</table>